

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY

DOCUMENT

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REQUEST FOR PAYMENT OF  
ADMINISTRATIVE EXPENSE

In re:

BED BATH &amp; BEYOND INC., et al.,

Chapter 11

Case Number: 23-13359

NOTE: This form should not be used for an unsecured claim arising prior to the commencement of the case. In such instances, a proof of claim should be filed.

Name of Creditor: Salesforce, Inc.  
(The person or other entity to whom the debtor owed money or property.)

- Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- Check box if you have never received any notices from the bankruptcy court in this case.
- Check box if the address differs from the address on the envelope sent to you by the court.

Name and Addresses Where Notices Should Be Sent:  
Salesforce, Inc.  
c/o Bialson, Bergen & Schwab  
830 Menlo Avenue, Suite 201  
Menlo Park, CA 94025

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ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR  
IDENTIFIES DEBTOR: 02711714

Check here if this request:

- replaces a previously filed request, dated:
- amends a previously filed request, dated:

## 1. BASIS FOR CLAIM

- Goods Sold
- Services performed
- Money loaned
- Personal injury/wrongful death
- Taxes
- Other (Describe briefly)

- Retiree benefits as defined in 11 U.S.C. §1114(a)
- Wages, salaries and compensations (Fill out below)

Provide last four digits of your social security number \_\_\_\_\_

2. DATE DEBT WAS INCURRED: 02/04/2023 (invoice date)

3. TOTAL AMOUNT OF REQUEST AS OF ABOVE DATE: 573,397.15

Check this box if the request includes interest or other charges in addition to the principal amount of the request. Attach itemized statement of all interest or additional charges.

## 4. Secured Claim

Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- Real Estate
- Motor Vehicle
- Other (Describe briefly) \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Check this box if there is no collateral or lien securing your claim.

5. Credits: The amount of all payments have been credited and deducted for the purposes of making this request for payment of administrative expenses.

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6. Supporting Documents: Attach copies of supporting documents, such as purchase orders, invoices, itemized statements of running accounts, contracts as well as any evidence of perfection of a lien.

DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain.  
If the documents are voluminous, attach a summary.

7. Date-Stamped Copy: To receive an acknowledgment of the filing of your request, enclose a self-addressed envelope and copy of this request.

Date:

10/13/2023

Sign and print below the name and title, if any, of the creditor or other person authorized to file this request (attach copy of power of attorney, if any).

/s/ James C. Vandermark, Esq.

*Penalty for presenting fraudulent claim:* Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

**NOTE:** The filing of this request will not result in the scheduling of a hearing to consider payment of your administrative claim but will result in the registry of your administrative claim with the Bankruptcy Court. If you wish to have a hearing scheduled on your claim, you must file a motion in accordance with D.N.J. LBR 3001-1(b).

rev.8/1/15